

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		59	461
FORMALITY REVIEW	MD	579	5/15/01
RESPONSE FORMALITY REVIEW	SK	809	7/16/01

Best Available Copy

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) ... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	Original 5/22/01
1	✓
2	/
3	/
4	/
5	✓
6	✓
7	✓
8	✓
9	0
10	0
11	0
12	0
13	L
14	✓
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19	/
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21	✓
22	✓
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24	/
25	/
26	/
27	/
28	✓
29	0
30	0
31	✓
32	0
33	✓
34	✓
35	0
36	0
37	0
38	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here